BOROUGH OF NORTH PLAINFIELD
Department of Fire Prevention and Protection
8 Lincoln Place, North Plainfield, NJ 07060
908 769-2935 – Fax: 908 769-2943

NEW BUSINESS REGISTRATION - (Non LHU)

1. Business or Ownership **Date of Registration:** _____

☐ Corporation ☐ Private/Individual ☐ Partnership ☐ Condominium
☐ Cooperative ☐ Government Agency ☐ LLC Corporation

2. Business Ownership Mailing Address

Name (Required - CEO if Corporation)_____
Last First Middle Initial

_____
Street and/or P.O.Box Suite/Apt. City State Zip Code

Telephone: _____ Fax:_____ After Hours:_____

Email Address (Required):_____

BUSINESS LOCATION INFORMATION

1. Name ofBusiness/Occupancy:_____

_____
Street and/or P.O. Box Suite/Apt. City State Zip Code

Telephone: _____ Fax:_____ Email:_____

Emergency Contact (Key Holder):_____

_____
Street and/or P.O.Box Suite/Apt. City State Zip Code

Work Phone:_____ Fax:_____ After Hours:_____

Brief Description of Business:_____

_____

FIRE DEPARTMENT USE ONLY

_____

_____

_____

_____

_____